

RESERVE APPLICATION

Hamilton County Sheriff's Office

A Tradition of Service Since 1823

18100 Cumberland Road

Noblesville, IN 46060

Admin. (317) 773-1872

Emer. (317) 773-1282

Please Fill in every blank—if not applicable then mark N/A. Incomplete applications will be discarded.

Check box that applies:

- ☐ Reserve Deputy
- ☐ Auxiliary Deputy
- ☐ Sheriff Community Service Volunteer

1. Personal History

Date: _____

Name: _____
First Middle Last

Address: _____
Street (Apt #)

City State Zip County

Date of Birth: _____ Age: _____

Are you a United States Citizen? ____ Yes ____ No

Social Security Number Birthplace City State

List any maiden name or any other names you have ever used, including all married names or nicknames, etc.

Home Phone: _____ E-Mail: _____

Work Phone: _____ Cell Phone: _____

Marital Status: __Married __ Single __ Divorced __ Widowed

2. Family History

Spouse: _____
Full name of Present Spouse Maiden Name

Number of children including step children and children you are guardian to: _____
and their current ages: _____

3. Physical Information

Height: _____ Weight: _____ Hair (color): _____

Eyes (color): _____ Glasses or Contacts: _____

Identifying scars, marks or tattoos: _____

4. Education

School Name	Location	Dates:	Year of	Credit Hours
		From-To	Graduation	or Degree
High School				
G.E.D.				
College/University				
Graduate School				
Technical Schools				
Trade/ Other Schools				

College / University:
Undergraduate Studies:
Major: _____
Minor: _____

Graduate Degree:
Major: _____

Special Studies/Honors:

5. Special Interests

Hobbies:

Activities and / or organizations:

6. Military Service

Have you ever been on active duty in the Armed Forces of the United States?

Yes____No____

Branch of Military Service:_____

Type of Discharge: _____ If other than Honorable, explain:

Dates of Active Duty (Month, Day and Year) FROM_____ TO_____

Highest Rank: _____

Present Classification: _____

Are you a member of a Reserve Unit? ____ Yes ____ No or National Guard Unit
____ Yes ____ No

If yes, Branch _____ Ready _____ Standby/RR _____

If your currently active in military, what is your anticipated release date? _____

List Special Training:

If you were in the military, were you ever court-martialed? ____ Yes ____ No

If yes, explain: _____

Did you have any type of disciplinary action taken against you while in the military? (This includes an Article 15, etc.) ____ Yes ____ No

If yes, explain: _____

7. References

Give three (3) references who are responsible adults of reputable standing in their community that you HAVE KNOWN WELL FOR AT LEAST THREE YEARS AND THAT KNOW YOU. References CANNOT be relatives, former employers or present employers. You must include their full names, home address, business address, (including city, state, zip code) and correct home or business telephone numbers, where they may be contacted during normal business hours

1. _____

Full Name (Last) (First) (Middle)	Years Known
_____	_____
Current Street Address / Apt#	City State Zip Code
_____	_____
Business Address	City State Zip Code
_____	_____
() _____	() _____
Home Phone	Work Phone Contact Time and Location

2. _____

Full Name (Last) (First) (Middle)		Years Known	
_____		_____	
Current Street Address / Apt#	City	State	Zip Code
_____	_____	_____	_____
Business Address	City	State	Zip Code
_____	_____	_____	_____
()	()		
Home Phone	Work Phone	Contact Time and Location	
_____	_____	_____	

3. _____

Full Name (Last) (First) (Middle)		Years Known	
_____		_____	
Current Street Address / Apt#	City	State	Zip Code
_____	_____	_____	_____
Business Address	City	State	Zip Code
_____	_____	_____	_____
()	()		
Home Phone	Work Phone	Contact Time and Location	
_____	_____	_____	

8. Employment

On the following pages you will find employment sheets. Please list your entire employment history, including part-time, temporary, and seasonal regardless of time employed. Begin with your current employment or most recent job and work backwards. If unemployed, list dates of unemployment. It is important that employment information is accurate and must cover from the last 15 years TO PRESENT.

If additional employment sheets are needed, please make photocopies prior to filling out any forms.

When completing the attached Employment Sheets, please list all area codes and zip codes. Make sure that all addresses and phone numbers are complete and correct.

Employment Reference Sheet

Name of Employer: _____ (phone) _____

Type of Business: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Date of Employment: From: ____/____/____ To: ____/____/____

Name of Immediate Supervisor, Title, and Phone Number:

Position: _____

Work Duties: _____

Reason for Leaving (explain in detail): _____

Employment Reference Sheet

Name of Employer: _____ (phone) _____

Type of Business: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Date of Employment: From: ____/____/____ To: ____/____/____

Name of Immediate Supervisor, Title, and Phone Number:

Position: _____

Work Duties: _____

Reason for Leaving (explain in detail): _____

Employment Reference Sheet

Name of Employer: _____ (phone) _____

Type of Business: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Date of Employment: From: ____/____/____ To: ____/____/____

Name of Immediate Supervisor, Title, and Phone Number:

Position: _____

Work Duties: _____

Reason for Leaving (explain in detail): _____

Employment Reference Sheet

Name of Employer: _____ (phone) _____

Type of Business: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Date of Employment: From: ____/____/____ To: ____/____/____

Name of Immediate Supervisor, Title, and Phone Number:

Position: _____

Work Duties: _____

Reason for Leaving (explain in detail): _____

Employment Reference Sheet

Name of Employer: _____ (phone) _____

Type of Business: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Date of Employment: From: ____/____/____ To: ____/____/____

Name of Immediate Supervisor, Title, and Phone Number:

Position: _____

Work Duties: _____

Reason for Leaving (explain in detail): _____

9. Residence

Chronology list all residences for the past ten (10) years, starting with your current address and working backwards. Include street address, rural route number, city or town, state, zip code and dates of residency. If in the military service, list dates, branch and duty stations. List addresses while attending school if away from home. Note when living parents by indicating an asterisk (*).

FROM MO/YR	TO MO/YR	COMPLETE ADDRESS	CITY	STATE	ZIP

10. Drivers License

Driver's License _____
License Number State Type/ Class (Operator, Class B, CDL, etc.)

Expiration Date Conditions (Corrective Lens, etc)

Has your driver's license ever been suspended, cancelled, or revoked? ____ Yes ____ No

If yes, please explain: _____

Have you ever held a Driver's License(s) in any other state? ____ Yes ____ No

If yes, which state(s), list the license number if known: _____

11. Traffic Tickets

Please list all traffic tickets you have received in the past 10 years. This does not include parking tickets.

DATE	CITY / STATE	CHARGES	DISPOSITION OF CASE

12. Vehicle Information

List all vehicles that you own and / or drive for personal use.

Year	Make	Model	Color	Plate #	State	Own / Buying

13. Court Record

Have you ever been arrested as an adult or juvenile (arrest is defined as being taken into custody and transported to a jail/detention facility) or charged with a crime as an adult or a juvenile (charged with a crime means issued a misdemeanor citation, a juvenile summons, and adult summons, arrested on a warrant, or indicted by a grand jury)?

_____ Yes _____ No

List **ALL** times you have been arrested or had criminal charges placed against you, including a detailed explanation of the circumstances (use attached sheets). You must list **ALL** arrests or charges even if they were dropped or did not result in a conviction and even if the public records were expunged or erased. An independent investigation of your criminal history will be conducted and, if arrests or charges are found which you did not report, your application will be rejected due to untruthfulness.

DATE	CITY/ STATE	CHARGES	CIRCUMSTANCES	DISPOSITION OF CASE

14. Subversive Organizations

Are you now or have ever been a member of any organization, association, movement, group or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the policy of advocating or approving the commission of an act of force or violence to deny other persons their rights under the Constitution of the United States, or seeks to alter the form of government of the United States by unconstitutional means?

_____ Yes _____ No

Are you now or have ever been affiliated or associated with any organization of the type described above, as an agent, official, or employee? _____ Yes _____ No

Are you now associating with, or have you associated with any individual, including relatives, who you know or have reason to believe are or have been members of any organization of the type described above? _____ Yes _____ No

Have you ever been engaged in any of the following activities of any organization of the type described above: Contribution(s) to, attendance or participation in any organization, social or other activities or any written, printed or other matter, prepared, reproduced, or published by them or any of their agents or instrumentalities? _____ Yes _____ No

If you have answered **YES** to any of the questions in this section, attached a fully detailed statement describing the circumstances. If you are associated with any of these organizations, specify the nature and extent of association with each, including offices held. You should include dates, places, and credentials now or formerly held. If associations have been with individuals who are members of these organizations, list the individual(s) and the organizations with which they were or are affiliated.

15. Miscellaneous

Have you previously submitted an application for employment as a merit deputy or reserve deputy with the Hamilton County Sheriff's Office or any other law enforcement agency as a regular police officer, deputy sheriff, correctional officer or reserve officer? _____ Yes _____ No

If yes, list what agency, approximate date of application and your current application status?

Are you presently involved or do you have knowledge that you might become involved in any criminal or civil lawsuit? _____ Yes _____ No. If yes, explain: _____

Have you ever worked for Hamilton County? _____ Yes _____ No

If so, please explain: _____

How were you referred to the Hamilton County Sheriff's Reserve Division? _____

Have you ever submitted to a polygraph test? _____ Yes _____ No If yes, explain:

Have you ever been finger printed for any reason (arrest, job application, etc.). If yes, explain:

List below any skills you possess which you think would be of value to the Hamilton County Sheriff's Office: _____

Give a brief statement as to why you want to join the reserve division of the Hamilton County Sheriff's Office: _____

Are you currently a member of any volunteer organization? Yes ____ No ____

If yes, please explain the nature of the volunteer organization and how long you have served in the volunteer capacity. _____

16. Authorization For Release of Personal Information

I, _____ do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Hamilton County Indiana Sheriff's Office, whether the said records are public, private, or confidential in nature.

The intent of this authorization is to give my consent for full and complete disclosure of records and information from my present employers, former employers, educational institutions, and references. I acknowledged and agree to undergo a physical examination at my expense, to be photographed, fingerprinted and undergo a character and credit investigation.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization, will be considered in determining my suitability for a position within the Hamilton County Sheriff Reserve Division. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information. A copy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

_____ Signature (include maiden name)	_____ Printed Name (include maiden name)	_____ Date	
_____ Address	_____ City	_____ State	_____ Zip
_____ Phone	_____ Date of Birth	_____ Social Security Number	

I understand and acknowledge the position of a deputy sheriff in the Hamilton County Sheriff's Reserve Division is one of extreme responsibility and pressure. I agree to perform assigned duties, which may be uncomfortable, inconvenient, or hazardous.

I certify that **All** statements made on this application are **True, Complete, and Accurate**. I further acknowledge this application contains no misrepresentations, falsifications or omissions. I acknowledge and understand that should the applicant investigation at any time reveal or disclose any such misrepresentations, falsifications, or omission, my application will be rejected.

_____ Signature (include maiden name)	_____ Printed Name (include maiden name)	_____ Date	
_____ Address	_____ City	_____ State	_____ Zip
_____ Phone	_____ Date of Birth	_____ Social Security Number	

Please attach any and all supported documents which includes:

- Copy of your birth certificate and/or U.S. Passport
- Photocopy of your Driver's License (front and back)
- Photocopy of your high school / G.E.D. diploma and /or certificate
- Photocopy of College/ University diploma
- Photocopy of Law Enforcement Academy Graduation Certificate. (If applicable)
- Photocopy of your Military DD214 discharge document. (If applicable)
- Applicants who have previously served in Active Reserve must submit a copy of their discharge papers, showing character of discharge from the Reserve Unit. (If applicable)
- Applicants who are Active Reserves who currently attend Military Drills must submit a Military Letter of Good Standing. (If applicable)
- Photocopy of any type of special training. (If applicable)

Please review your application to ensure all questions have been answered completely. If additional explanation is required, please submit on additional paper with the corresponding section number.

Applications will be held for one (1) year only – Applicants will then have to reapply.

Attach personal photograph to application on separate page:

